

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>65A113</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>02/04/2020</b>
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NAME OF PROVIDER OR SUPPLIER  <b>SPRING OAK OF TOMS RIVER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2145 WHITESVILLE ROAD</b> <b>TOMS RIVER, NJ 08755</b>
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	<p>Initial Comments</p> <p>Initial Comments: TYPE OF SURVEY: Initial survey</p> <p>COMPLAINT #: NJ 00133000</p> <p>CENSUS: 99</p> <p>SAMPLE SIZE: 3</p> <p>The facility is not in substantial compliance with all of the standards in the New Jersey Administrative Code 8:36, Standards for Licensure of Assisted Living Residences, Comprehensive Personal Care Homes and Assisted Living Programs. The facility must submit a plan of correction, including a completion date for each deficiency and ensure that the plan is implemented. Failure to correct deficiencies may result in enforcement action in accordance with provisions of New Jersey Administrative Code Title 8, Chapter 43E, Enforcement of Licensure Regulations.</p>	A 000		
A 901	<p>8:36-10.5(c)(4) Dining Services</p> <p>(c) Meals shall be planned, prepared, and served in accordance with, but not limited to, the following:</p> <p>4. Current menus with portion sizes and any changes in menus shall be posted in the food preparation area. Menus shall be posted in a conspicuous place in residents' area, and/or a copy of the menu shall be provided to each resident. Any changes or substitutes in menus shall be posted or provided in writing to each resident. Menus, with changes or substitutes, shall be kept on file in the facility for at least 30 days;</p>	A 901		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

03/13/20

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A 901	<p>Continued From page 1</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation, interview and record review it was determined that the facility failed to follow the Dietitian's planned and written menus, failed to post menus with portion sizes in the kitchen preparation area, failed to notify the Dietitian of menu changes and failed to maintain a record of changes to the menu for at least 30 days. This deficient practice was evidenced by the following:</p> <p>On 2/4/20 at 11:30 a.m., during the lunch meal, the surveyor toured the dining room and observed that the residents were served vegetable soup and "turkey sub" for lunch. At 11:40 a.m., the surveyor toured the kitchen and observed the posted daily lunch and dinner menus in front of the serving area dated February 4, 2020, which listed the food items to be served for the lunch and dinner meals for that day.</p> <p>The surveyor observed that there were no portion sizes documented on the "Tuesday" menus posted in the kitchen for that day. The "Tuesday Lunch" menu included soup of the day, "turkey sub" or loaded green tossed salad and assorted desserts. The "Tuesday Dinner" menu included, fried pork chops with rice and vegetables or stuffed rigattoni alfredo and pie. The surveyor did not observe a planned, written and dated menu with portion sizes posted in the kitchen preparation area.</p> <p>The surveyor interviewed a Dietary Assistant (DA) regarding the above concerns and requested a planned written menu with portion sizes. The DA</p>	A 901		

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A 901	<p>Continued From page 2</p> <p>stated that the facility ordered meat products in 4 ounce portions as a standard measure and other food items were served in 6 or 8 ounce serving dishes. The DA added that during orientation all dietary employees received training on portion sizes. In addition, the DA stated that the facility had five-weeks of planned, written menus, however, the menus were no longer being used. The DA also stated that the facility currently used a two-week menu cycle that was created from a list of approved food items provided by the facility.</p> <p>At 12:45 p.m., the surveyor interviewed the Dietary Director and requested the 5-weeks planned, written menus with portion sizes. The Dietary Director stated that the facility was part of a dietary group program and the facility purchased menus from the web group page, however, he further stated that the facility was no longer part of the web based program. The Dietary Director stated that he created the daily menu from an approved list of food items, which was nutritionally evaluated by a Dietitian quarterly and added that the Dietitian was last at the facility on 1/14/20.</p> <p>During continued interview with the Dietary Director the surveyor requested to review documentation of the menus for the last 30 days, with all changes, including substitutions that were made to the menus. The Dietary Director stated that he changed the lunch menu for 2/4/20 because the delivery was not available and explained that he did not keep copies of past menus or changes that were made to the menus.</p> <p>At 1:15 p.m, the surveyor interviewed the Administrator and informed her of the above concerns. The Administrator confirmed that the facility had a 5-week cycle planned, written menu</p>	A 901		

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A 901	<p>Continued From page 3</p> <p>and stated that the facility was still a part of the web group program and they have a Dietitian. The Administrator provided the surveyor with a copy of the five-week menu titled, "Week at a Glance Fall/Winter 2019/2020," which was signed as reviewed by a Registered Dietitian. The Administrator stated that the Dietary Director was not computer "savvy" and was not familiar with the program.</p> <p>The surveyor reviewed the daily lunch menu dated 2/4/20 and the daily dinner menus dated 1/29, 1/30, 1/31, 2/1, 2/3 and 2/4/20 provided by the Dietary Director and the five-week menu provided by the Administrator. Review of the daily lunch and dinner menus revealed that the daily menus did not reflect the five-week cycle menus provided by the Administrator. The Dietary Director did not follow the five-week cycle of "Week at a Glance" menus for the weeks of 1/26 and 2/2/20.</p> <p>On 2/5/20 at 11 a.m., during a post survey interview the Dietitian confirmed that she was part of the Dietitian program and visited the facility quarterly and as needed. The Dietitian also stated that she was not aware of the menu changes and that the Dietary Director and kitchen staff should have followed the five-week menu cycle.</p> <p>The facility failed to follow the 5-week planned, written menus consistently, failed to ensure that menus with portion sizes were posted in the kitchen preparation area, failed to notify the Dietitian of all changes and substitutions to the menus and failed to maintain a record of those changes and substitutions for at least 30 days.</p>	A 901		